Provider Complaint & Appeal Summary Report

Health Plan ID: 2162934
Health Plan Name: LaCare
Health Plan Contact: ***

Contact Email: ***

Report Period Start Date: 20121201 Report Period End Date: 20121231

BAYOU HEALTH Reporting

Document ID: PI182

Document Name: PROVIDER COMPLAINT & APPEAL SUMMARY REPORT

Reporting Frequency: Monthly

Report Due Date: 15th of the month following end of reporting period

File Type: Excel

Subject Matter: Informatics (I)

Summary of	By Health	Ву			
Appeal Decisions	Plan	Arbitration			
Total # Decisions	2	0			
% Upheld	50	0			
% Overturned	50	0			
% Withdrawn	0	0			

	COMPLAINT STATUS Pro	Total # of	# of COMPLAINTS by ISSUE CATEGORY				# Complaints Pending or	•		By Appeal Type			# Appeals Pending or			
Reporting Period		Provider Complaints	Claims / Payments	Covered Services	PAs/Referrals	PCP Auto-Assign/ Linkages	Provider Registry/ Directory	Lack of Information /Response	Other	Closed 31 to		Total Provide	Pre-Service Denial	Payment Denial	Closed 31 to 90 Days Post	Closed >90
	Received this Month	821	759	1	6	0	2	1	. 52	2		2	2			
	Total Closed this Month	931	865	2	5	0	3	1	. 55	43		2	. 2			
	Withdrawn by Provider															
	Per Internal Plan Action/Decision	931	865	2	5	0	3	1	. 55	43		2	. 2			
	Per Independent Arbitration															
	Per DHH Review															
Dec-2012	Other (Review determined not a complaint)															
	Total Pending (cumulative as of month end)	82	78	0	1	0	2	C) 1	11						
	Information needed from Provider															
	Internal Plan Review	82	78	0	1	0	2	C) 1	11						
	Independent Arbitration															
	DHH Review															
	Other (Review determined not a complaint)															
	Total Complaints Received YTD	5632	4947	18	23	1	51	24	568	3		15	15			
	Total Closed YTD	5550	4869	18	22	1	49	24	567	209	10	15	15			
2012 Year to Date (YTD)	Withdrawn by Provider															
	Per Internal Plan Decision/Correction	5541	4861	18	22	1	49	24	566	205		15	15			
	Per Independent Arbitration															
	Per DHH Decision															
	Other (Review determined not a complaint)	9	8	0	0	0	0	C) 1							

¹You must submit Attachment 1 - Complaint Summary Listing detailing all pending or closed (A1) complaints not resolved within 30 to 90 days

²You must submit Attachment 2 - Appeal Summary Listing detailing all pending or closed (A1) appeals not resolved within 30 to 90 days.

PI 182 - Attachment 1: Summary listing of Complaints Pending or Closed in Current Reporting Month that were closed 30 to 90 or more days after Original Date Filed

Health Plan Name: LaCare
Reporting Period: Dec-2012

Status Category Codes							
Pending	Closed						
P1-Information needed from Provider	C1-Withdrawn by Provider						
P2-Internal Plan Review	C2-Per Internal Plan Action/Decision						
P3-Per Independent Arbitration	C3-Per Independent Arbitration						
P4-Referred to DHH	C4-Per DHH Review						
P5-Other	C5-Other						

Date Filed (YYYYMMDD)	Name of Person Filing Complaint	Organization	Summary of Complaint	Summary of Attempts to Resolve Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category
20121015	Caeli	TOURO INFIRMARY	Claims / Payments	work request needed		80 F	P2
20121017	Nikki	ALLEN PARISH HOSPITAL RURAL HEALTH CENTER	Provider Registry/ Directory	Provider Agreement updated/under review		78 F	P2
20121018	Stacey	VICK, STEPHEN R.	Claims / Payments	Provider Agreement updated/under review		77 F	P2
20121112	Deborah	LEBLANC, BRIAN J.	Claims / Payments	work request needed		53 F	2
20121112	Beth	SANFORD, ALISON L.	Claims / Payments	Provider Agreement updated/under review		51 F	P2
20121114	Nirupa	SAINI, SATINDER	Claims / Payments	prov education		49 F	P2
20121116	Sally	COOLEY, BRETT A.	Claims / Payments	Provider Agreement updated/under review		48 F	P2
20121121	lisa	SOUTHERN REHAB AND MEDICAL CENTER	Claims / Payments	Provider Agreement updated/under review		43 F	P2
20121129	Jade	RAMSEY, ROSS D.	Claims / Payments	Provider Agreement updated/under review		35 F	P2
20121130	Toni	SCHWAB, JOHN K.	Claims / Payments	prov education		34 F	P2
20121130	chase	TAYLOR, FLYNN A.	Claims / Payments	sent to PM		34 F	P2
20120911	Mindy	ANGELOPOULOS, PETER	Claims / Payments	Provider Agreement updated/under review	20121205	85 (C2
20120913	Michelle	MORRIS, STEVEN W.	Claims / Payments	Work Request Submitted	20121206	84 (C2
20120926	Leslie	ROGERS, GLYN D.	Claims / Payments	Provider Agreement updated/under review	20121205	70 (C2
20120926	Shantell	DUPLECHAIN, GREGORY	Claims / Payments	Provider Agreement updated/under review	20121203	68 (C2
20121002	Doretha	GEM DRUGS VITAL CARE	Claims / Payments	Work Request Submitted	20121206	65 (C2
20121003	Mika	CHENIER, LAWRENCE F.	Claims / Payments	Work Request to be submitted	20121206	64 (C2
20121003	Wendy	CRAWFORD, AMANDA K.	Claims / Payments	Provider Agreement updated/under review	20121205	63 (C2
20121004	Shirley	FAUL, TIMOTHY D.	Claims / Payments	Provider Agreement updated/under review	20121205	62 (C2
20121005	Tiffany	CHILDRENS HOSPITAL	Claims / Payments	Provider Agreement updated/under review	20121207	63 (C2
20121012	ROBIN	PELTIER, HENRY M.	Claims / Payments	Provider Agreement updated/under review	20121207	56 (C2
20121012	Loretta	CAVALIER JR, DEBORAH S.	Claims / Payments	Provider Agreement updated/under review	20121207	56 (C2
20121017	Nikki	SCHUMACHER, ROBERT C.	Claims / Payments	Provider Agreement updated/under review	20121227	71 (C2
20121017	David	NIDA, JOSEPH R.	Claims / Payments	Work Request to be submitted	20121227	71 (C2
20121102	Tanika	ATKINSON, RAYMOND E.	Claims / Payments	Provider Agreement updated/under review	20121227	55 (C2
20121105	Danielle	VENTERS, CHARMAINE L.	Claims / Payments	Provider Agreement updated/under review	20121227	52 (C2
20121105	correspondence	BORDELON, LORI D.	Claims / Payments	Claim Reprocessed	20121206	31 (C2

Date Filed (YYYYMMDD)	Name of Person Filing Complaint	Organization	Summary of Complaint	Summary of Attempts to Resolve Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category
20121105	correspodence	CARMICHAELS CASHWAY PHARMACY INC	Claims / Payments	Claim Reprocessed	20121206	31 C2	2
20121105	correspondence	CARMICHAELS CASHWAY PHARMACY INC	Claims / Payments	prov education	20121206	31 C2	2
20121105	correspondence	CARMICHAELS CASHWAY PHARMACY INC	Claims / Payments	Claim Reprocessed	20121206	31 C2	2
20121105	Doug	DUCOMBS, SHERRY C.	Claims / Payments	Work Request Submitted	20121207	32 C2	2
20121105	Eric	QUALITY MEDICAL CARE AND SERVICES LLC	Claims / Payments	Work Request Submitted	20121207	32 C2	2
20121106	KRISTY	GREEN, HILMA L.	Claims / Payments	Provider Agreement updated/under review	20121220	44 C2	2
20121106	amy	HAYNES, JOHN H.	Claims / Payments	Work Request to be submitted	20121220	44 C2	2
20121106	amy	HAYNES, JOHN H.	Claims / Payments	WR needed; duplicate of SF20121106215411884	20121220	44 C2	2
20121106	amy	HAYNES, JOHN H.	Claims / Payments	WR needed; duplicate of SF20121106215411884	20121220	44 C2	2
20121106	amy	HAYNES, JOHN H.	Claims / Payments	WR needed; duplicate of SF20121106215411884	20121220	44 C2	2
20121106	amy	MAY, WALKER C.	Claims / Payments	WR needed	20121220	44 C2	2
20121107	Trista	VARNISHUNG, KIAT	Claims / Payments	Provider Agreement updated/under review	20121227	50 C2	2
20121109	гоху	DELTA HOME CARE INC	Claims / Payments	PM updated	20121229	50 C2	2
20121109	Tammy	DUPUIS, MICHAEL	Claims / Payments	Provider Agreement updated/under review	20121220	41 C2	2
20121109	Brittany	KADUE, DIANA L.	Claims / Payments	Provider Agreement updated/under review	20121210	31 C2	2
20121115	Diane	JOHNSON, DEBORAH M.	Claims / Payments	Provider Agreement updated/under review	20121228	43 C2	2
20121116	Jennie	ACCARDO, REBECCA L.	Claims / Payments	Provider Agreement updated/under review	20121228	42 C2	2
20121119	keywana	OUR LADY OF THE LAKE REGIONAL MEDICAL CENTER	Claims / Payments	Work Request to be submitted	20121228	39 C2	2
20121126	Jerry	BYRD, JENNIFER L.	Claims / Payments	Provider Agreement updated/under review	20121228	32 C2	2
20121126	Deidra	FEIGLEY, STEVEN D.	Claims / Payments	Provider Agreement updated/under review	20121228	32 C2	2
20121126	Deidra	HOLLIER, NICOLLE	Claims / Payments	Provider Agreement updated/under review	20121228	32 C2	2
20121127	correspondence	WALKER, PATRICK D.	Claims / Payments		20121228	31 C2	2
20121127	Trisha	VIATOR, TIMOTHY A.	Claims / Payments	Provider Agreement updated/under review	20121228	31 C2	2
20120917	Susan	CARELINK HOME CARE SERVICES INC	Claims / Payments	Work Request Submitted	20121126	70 C2	2
20120927	Kim	PSA HEALTHCARE	Claims / Payments	Work Request Submitted	20121126	60 C2	2
20121012	Mona	MORAD, AMMAR B.	Claims / Payments	prov education	20121112	31 C2	2
20121012	Mona	MORAD, AMMAR B.	Provider Registry/ Directory	prov education	20121112	31 C2	2